

TACTICAL RESPONSE REPORT/Chicago Police Department

MEMBER INVOLVED <input type="checkbox"/> DNA	1. DATE OF INCIDENT 17-APR-2015	TIME 22:53:00	2. ADDRESS OF OCCURRENCE 2138 E 74TH ST CHICAGO, IL 60649	3. LOCATION CODE 304	4. BEAT/OCCUR 0333			
	5. POSITION 9161	6. LAST NAME BRUNO	7. FIRST NAME BRENDAN D	8. STAR NO. 16733	9. SEX <input checked="" type="checkbox"/> 01 M <input type="checkbox"/> 02 F	10. RACE CODE WHI	11. AGE 604	12. HT. 220
SUBJECT INFORMATION <input type="checkbox"/> DNA	14. DATE OF APPT. 05-OCT-2012	15. EMPLOYEE NO. [REDACTED]	16. UNIT & SEAT OF ASSIGNMENT 003 0368D	17. DUTY STATUS <input checked="" type="checkbox"/> 01 On <input type="checkbox"/> 02 Off	18. MEMBER INJURED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No	19. MEMBER IN UNIFORM? <input checked="" type="checkbox"/> 01 Yes <input type="checkbox"/> 02 No		
	20. LAST NAME KEMP	21. FIRST NAME JEFFERY	22. M.I. [REDACTED]	23. SEX <input checked="" type="checkbox"/> 01 M <input type="checkbox"/> 02 F	24. RACE BLK	25. D.O.B. [REDACTED]	26. HT. 508	27. WT. 141
REASON FOR USE OF FORCE (Check all that apply)	28. ADDRESS [REDACTED]	29. TELEPHONE NO. [REDACTED]	30. WAS SUBJECT ARMED? PISTOL - SEMI-AUTOMATIC <input checked="" type="checkbox"/> 01 Yes <input type="checkbox"/> 02 No	31. SUBJECT INJURED? <input checked="" type="checkbox"/> 01 Yes <input type="checkbox"/> 02 No	32. SUBJECT ALLEGED INJURY? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No			
	33. WHERE WAS MEDICAL TREATMENT OBTAINED? COOK COUNTY MEDICAL EXAMINER - MOR		34. BY WHOM? [REDACTED]	35. CONDITION <input type="checkbox"/> 03 Hospitalized <input checked="" type="checkbox"/> 04 Not Hospitalized <input type="checkbox"/> 05 Refused Medical Aid	36. CHARGES PLACED [REDACTED]	37. CB NO. 00000000	IR NO. [REDACTED]	DNA
SUBJECT'S ACTIONS <input type="checkbox"/> DNA	PASSIVE REGISTER		ACTIVE REGISTER	ASSAULT:ASSAULT	ASSAULT:BATTERY	ASSAULT:DEADLY FORCE		
	DID NOT FOLLOW VERBAL DIRECTION <input checked="" type="checkbox"/>	STIFFENED (DEAD WEIGHT) <input type="checkbox"/>	FLED PULLED AWAY OTHER _____	IMMINENT THREAT OF BATTERY OTHER _____	ATTACK WITH WEAPON ATTACK WITHOUT WEAPON OTHER _____	USES FORCE LIKELY TO CAUSE DEATH OR GREAT BODILY HARM WEAPON OTHER _____		
MEMBER'S RESPONSE <input type="checkbox"/> DNA	MEMBER PRESENCE VERBAL COMMANDS ESCORT HOLDS WRISTLOCK ARMBAR PRESSURE SENSITIVE AREAS CONTROL INSTRUMENT OC/OCHEMICAL WEAPON WAUTHORIZATION OTHER _____	OPEN HAND STRIKE TAKE DOWN / EMERGENCY HANDCUFFING OC CHEMICAL WEAPON CANINE TASER (Probe Discharge) TASER (Contact Stun) TASER (Spark Displayed) OTHER _____	ELBOW STRIKE CLOSED HAND STRIKE/PUNCH IMPACT WEAPON (Describe in Box 40) OTHER _____	KNEE STRIKE KICKS IMPACT MUNITION (Describe in Box 40) OTHER _____	FIREARM OTHER _____			
	40. ADDITIONAL INFORMATION THE OFFENDER POINTED A SEMI-AUTOMATIC PISTOL AT THE R/O.							
WEAPON DISCHARGE INCIDENT <input type="checkbox"/> DNA	41. WEAPON TYPE <input checked="" type="checkbox"/> 04 SEMI-AUTO PISTOL <input type="checkbox"/> 01 REVOLVER <input type="checkbox"/> 05 CHEMICAL WEAPON <input type="checkbox"/> 02 RIFLE <input type="checkbox"/> 06 TASER (Probe Discharge) <input type="checkbox"/> 03 SHOTGUN <input type="checkbox"/> 07 OTHER	42. INCIDENT OCCURRED <input type="checkbox"/> Indoors <input checked="" type="checkbox"/> Outdoors	43. LIGHTING CONDITIONS <input type="checkbox"/> 02 Night <input type="checkbox"/> 03 Dawn <input type="checkbox"/> 04 Dusk <input checked="" type="checkbox"/> 05 Good Artificial	44. WEATHER CONDITIONS CLEAR				
	45. MAKE/MANUFACTURER SMITH & WESSON -US- (BODYGUARD, CHIEF SPECIAL)	46. MODEL M&P	47. BARREL LENGTH 4.0	48. CALIBER/GAUGE 9 MM				
49. TASER DART ID NO. HAE8653	50. WEAPON SERIAL NO. (Include Letters) HAE8653	51. CHICAGO GUN REG. NO. R028585S	52. IL FIREARM OWNER ID. NO. [REDACTED]	53. HANDGUN CERTIFICATE NO.				
54. SPECIAL WEAPON CERTIFICATE NO.	55. PROPERTY INVENTORY NO.	56. TYPE OF AMMUNITION USED Department Issued	57. NO. OF WEAPONS DISCHARGED BY THIS MEMBER. 1	58. TOTAL NO. OF SHOTS MEMBER FIRED 2				
59. WHO FIRED FIRST SHOT <input type="checkbox"/> 03 OTHER (Specify) <input checked="" type="checkbox"/> 01 MEMBER <input type="checkbox"/> 02 OFFENDER	60. WAS FIREARM RELOADED DURING INCIDENT <input type="checkbox"/> 01 YES <input checked="" type="checkbox"/> 02 NO	61. NO OF CARTRIDGES/ SHOT SHELLS RELOADED 0	62. HOW WAS MEMBER'S HANDGUN WORN <input type="checkbox"/> 03 OTHER (Specify) <input checked="" type="checkbox"/> 01 RT. SIDE (WAIST) <input type="checkbox"/> 02 LT. SIDE (WAIST)	70. EVENT NO. 1510702211				
63. HOW WAS MEMBER'S HANDGUN DRAWN <input type="checkbox"/> 03 OTHER (Specify) <input checked="" type="checkbox"/> 01 STRONG SIDE DRAW <input type="checkbox"/> 02 CROSS DRAW	64. SPECIFY METHOD/EQUIPMENT USED TO RELOAD DNA	65. DID MEMBER USE SIGHTS <input type="checkbox"/> 01 YES <input checked="" type="checkbox"/> 02 NO	71. RD NO. HY226378					
66. DESCRIBE PROTECTIVE COVER USED (LIGHT POLES, DOORWAYS, CAR, FURNITURE, ETC) SQUAD CAR	67. DISTANCE BETWEEN INVOLVED MEMBER & OFFENDER WHEN FIRST SHOT WAS FIRED <input type="checkbox"/> 01 0 - 5 FT. <input type="checkbox"/> 02 5 - 10 FT. <input type="checkbox"/> 03 10 - 15 FT. <input checked="" type="checkbox"/> 04 OVER 15 FT.	72. CASE INFO.						
68. PERSON/OBJECT STRUCK AS RESULT OF THE DISCHARGE OF MEMBERS WEAPON <input checked="" type="checkbox"/> 01 PERSON <input type="checkbox"/> 02 OBJECT <input type="checkbox"/> 03 BOTH <input type="checkbox"/> 04 UNKNOWN	69. POSITION OF MEMBER DISCHARGING WEAPON <input type="checkbox"/> 01 STANDING <input type="checkbox"/> 02 LYING DOWN <input type="checkbox"/> 03 SITTING <input type="checkbox"/> 04 KNEELING <input type="checkbox"/> 05 OTHER (Specify)	73. SIGNATURE STAR/EMPLOYEE NO. 16733						
74. REVIEWING SUPERVISOR (Print Name) LEE PALMER, PATRICK C		STAR NO 2099	SIGNATURE [REDACTED]	DATE REVIEWED 18-APR-2015 04:01:35				
Reviewing supervisor will ensure the legibility and completeness of this report and attest by entering the required information below.								

LIEUTENANT OR ABOVE/OCIC REVIEW

THE ON-CALL INCIDENT COMMANDER (OCIC) WILL COMPLETE THE REVIEW SECTION FOR 1.) ALL INCIDENTS INVOLVING THE DISCHARGE OF A FIREARM BY A DEPARTMENT MEMBER; 2.) ALL INCIDENTS INVOLVING THE SERIOUS INJURY OR DEATH OF A MEMBER OF THE PUBLIC SUBSEQUENT TO INTERACTIONS WITH A DEPARTMENT MEMBER; 3.) ALL INCIDENTS INVOLVING THE DISCHARGE OF IMPACT MUNITIONS BY A DEPARTMENT MEMBER; 4.) ANY LESSER USE OF FORCE BY A DEPARTMENT MEMBER WHEN THAT USE OF FORCE STEMS FROM THE SAME INCIDENT DESCRIBED HERE IN 1 THROUGH 3.

THE ASSIGNED INVESTIGATING SUPERVISOR THE RANK OF LIEUTENANT OR ABOVE FROM THE DISTRICT OF OCCURRENCE WILL COMPLETE THE REVIEW SECTION FOR ALL OTHER INCIDENTS.

75. SUBJECT'S STATEMENT REGARDING THE USE OF FORCE DNA REFUSED INTERVIEW NOT CONDUCTED (Specify Reason)
Subject deceased.

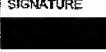
76. LIEUTENANT OR ABOVE/OCIC RATIONALE FOR BOX 77 FINDING

Based upon the information available at the time of this report, it is the preliminary determination of the Undersigned that Officer Brendan BRUNO #16733 acted in compliance with Department policy. Officer Bruno fired his weapon in fear of his life after offender KEMP, Jeffery IR#1903460, pointed his weapon at Officer Bruno and Officer Jason STREEPER #13704, thus placing the officers in fear of their lives. Log Number 1074736 was issued for this incident. U#015-006.

77. LIEUTENANT OR ABOVE/OCIC FINDING BASED UPON CURRENTLY AVAILABLE INFORMATION

I HAVE CONCLUDED THAT THE MEMBER'S ACTIONS WERE IN COMPLIANCE WITH DEPARTMENT PROCEDURES AND DIRECTIVES I HAVE CONCLUDED THAT FURTHER INVESTIGATION IS REQUIRED.

LOG NO./CRNO. 1074736 OBTAINED

78. LIEUTENANT OR ABOVE/OCIC (Print Name) ALEXANDER, DANA	SIGNATURE 	DATE COMPLETED 18-APR-2015	TIME 04:26:26
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79. TOTAL TRR's THIS EVENT NO.

1